

## **State Transit Assistance Special Project Proposal Application Instructions**

Operating projects are eligible for funding up to a maximum of 80 percent state participation for the first year and 50 percent state participation for the second year. Capital project are eligible for funding up to a maximum of 85 percent state participation. Priority is given to projects which include a contribution from human service agencies.

**Legal Name of Applicant:** Enter the name of the agency submitting the project proposal.

**Contact Person:** Enter the name of the person that the Office of Public transit staff should contact if there are any questions on the submitted materials.

**Title:** Enter the position held by contact person.

**Address:** Enter the street address or post office box number, city, state and ZIP code.

**Telephone:** Enter the phone number of contact person.

**Email Address:** Enter the Email address of contact person.

**Type of STA Special Project Support requested:** Check the appropriate box.

**General Project Cost Information:** Include funding amounts for each category, and if applicable, name(s) of the other funds available.

**Description of the proposed project:** Describe proposed project, including nature of service or improvement, specific service area/location, service days/hours, who will provide proposed fare, etc. If appropriate, describe service before and after implementation. If project includes a capital component this should be described as well. (Projects involving expansion vehicles must give before and after information on spare ratios and rationale why existing fleet cannot be used).

**Description of how the project complements or enhances existing services:** If there are benefits to the transit program anticipated as a result of implementing the proposed project, please describe the benefits. Will service be open to the general public? (Note added hours [specify times], added geographic coverage [specify area], a sheltered pickup location were none currently exists, etc.).

**Letters of Support:** Provide letters of support from human service agencies and other partner organizations involved with the project, with specific reference to those agencies willing to fund the project and documentation of formal board action.

**Nature/Source(s) of matching funds:** Describe where/whom match will come from and what type of funding it might be (federal, state, local, private, etc.) including program names, if applicable. Additionally, include information on the status of local match from those agencies, (i.e. verbal commitment, signed agreement, etc.).

**Detailed budget with calculations:** Show how total costs for project have been estimated, including various cost components. Show calculation of net project cost based on subtraction of passenger revenues for operating projects (anticipated expenditures, such as salaries, benefits, fuel, maintenance costs, etc.) and revenue (including fares, hours of services, additional miles,

etc.). If the project includes both operating and capital components, please show cost calculations and funding requests for each.

**Provide an estimate of ridership that will potentially be served by this project:** Describe how this estimation was derived and show calculations.

**Provide the short-term and long-term goals of this project and the associated performance measures:** List and explain performance measures you intend to be used to determine if the project will be a success.

**Plans for project continuation (operating projects only):** Explain what measures will be taken to assure that the proposed project will continue after one or two years of STA funding? Describe how you intend to fund it.

**Describe how this project contributes to coordinated transportation in your community:** Explain how the proposed project contributes to coordination of public transit and human service transportation.

**Project implementation date:** Date anticipated service will begin.

**Ways in which service will be marketed to targeted ridership and/or the public:** Describe how the new service will be marketed to the targeted riders and what role the human service agencies will play. Describe how the public will be made aware of the project and how to access it.

**Signature of Authorized Representative:** The legal signatory for the transit system acknowledges the above information is accurate to the best of his/her knowledge, the transit system has the required non-federal match and is prepared to proceed with implementation of the project upon grant approval.

**Printed Name:** Print name exactly as signed.

**Title:** Title of authorized signatory.

**Date:** Date project proposal form was completed.